

10/690296

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|--------------|--------------|
| TOTAL CLAIMS | | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | minus 20= | * |
| INDEPENDENT CLAIMS | minus 3 = | * |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * 3 | Minus ** 20 | = |
| Independent | * 2 | Minus *** 3 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus ** | = |
| Independent | * | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 150.00 |
| X\$ 25= | |
| X100= | |
| +180= | |
| TOTAL | |

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 300.00 |
| X\$50= | |
| X200= | |
| +360= | |
| TOTAL | |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 25= | |
| X100= | |
| +180= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$50= | |
| X200= | |
| +360= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 25= | |
| X100= | |
| +180= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$50= | |
| X200= | |
| +360= | |
| TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus ** | = |
| Independent | * | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|---------|----------------|
| X\$ 25= | |
| X100= | |
| +180= | |

| RATE | ADDITIONAL FEE |
|--------|----------------|
| X\$50= | |
| X200= | |
| +360= | |